

Slug / Spill Prevention Control Plan

Company Name: _____

Address: _____

Telephone Number: _____

Company Officials & Title: _____

Emergency Contact Official & Telephone Number: _____

1.) Description of discharge practices, including nonroutine batch discharges: _____

2.) Description of stored chemicals: _____

3.) Procedures for promptly notifying the P.O.T.W. of slug discharges: _____

4.) Procedures to prevent adverse impact from accidental spills, including inspection and maintenance of storage areas, handling and transfer of materials, loading and unloading operations, control of plant site run-off, worker training, building of containment structures or equipment, measures for containing toxic organic pollutants, and/or measures and equipment for emergency response:

5.) Follow-up practices to limit the damage suffered by the treatment plant or the environment: _____

